FORM D

UNITED STATES

SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURIF PURSUANT TO REGULATION L SECTION 4(6), AND/OR

UNIFORM LIMITED OFFERING EXEMPTION

01112	
OMB Number:	3235-0076
Expires:	April 30, 2008

Estimated average burden Hours per response: 16.00

SEC USE ONLY							
Prefix		Serial					
1	DATE RECE	IVED					

Name of Offering (check if this is an amendment Ivory Offshore Flagship Fund, Ltd. (Class D & E)
Filing Under (Check box(es) that apply): Rule 50	04 Rule 505 Rule 506 Section	4(6) ULOE
Type of Filing: New Filing Amendme	ent .	
	A. BASIC IDENTIFICATION DATA	
1. Enter the information requested about the issuer		
Name of Issuer (⊠ check if this is an amendment an Ivory Offshore Flagship Fund, Ltd. (Class D & E		07074271
Address of Executive Offices (Number and Street, Cit c/o M&C Corporate Services Limited, P.O. Box Street, George Town, Grand Cayman, Cayman Is	309 G.T., Ugland House, South Church	Telephone Number (Including Area Code) 345-949-8066
Address of Principal Business Operations (Number an (if different from Executive Offices)	d Street, City, State, Zip Code)	Telephone Number (Including Area Code)
Brief Description of Business To operate as a priv	ate investment company.	
		r (please specify): A Cayman Islands Exempted
business trust Iimited pa	tnership, to be formed	Company
Actual or Estimated Date of Incorporation or Organiza	Month Year tion: 08 03	☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization (Enter two CN for C	vo-letter U.S. Postal Service abbreviation for canada; FN for other foreign jurisdiction)	State: <u>FN</u>
GENERAL INSTRUCTIONS		

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy of bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		_			A. BASIC IDEN	TIFICA	TION DATA		
2.	Ente	r the informatio	n requested for the	foll	owing:				
	0	Each promoter	of the issuer, if the	issu	er has been organized	within 1	the past five years;		
	o	Each beneficial of the issuer;	owner having the	pow	er to vote or dispose, o	or direct	the vote or disposition	n of, 10% or more o	f a class of equity securities
	0	Each executive	officer and directo	ıof	corporate issuers and o	of corpo	rate general and mana	ging partners of part	nership issuers; and
	o	Each general ar	nd managing partne	er of	partnership issuers.				
Check B	ox(es	that Apply:	Promoter		Beneficial Owner		Executive Officer	☑ Director	General and/or Managing Partner
Full Nar Macngu	-	st name first, if Curtis	individual)						
		sidence Addres	`		Street, City, State, Zipeles, California 900				
		that Apply:	Promoter		Beneficial Owner		Executive Officer	☑ Director	General and/or Managing Partner
		st name first, if istopher T.	individual)						
		sidence Addres			Street, City, State, Zip eles, California 900			·· ···	
		that Apply:	Promoter		Beneficial Owner	, <u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	Executive Officer	☑ Director	General and/or Managing Partner
Full Nar Lang, N		st name first, if	individual)						····
		esidence Addres	· · · · · · · · · · · · · · · · · · ·		Street, City, State, Zip r Harbour Centre, P.O			Cavman Islands	·····
		that Apply:	Promoter		Beneficial Owner		Executive Officer	Director	General and/or Managing Partner
Full Nan Byrne, M		st name first, if	individual)						
		sidence Addres al Management			Street, City, State, Zip Harbour Centre, P.O			Cayman Islands	
Check B	ox(es)	that Apply:	Promoter		Beneficial Owner		Executive Officer	Director	General and/or Managing Partner
Full Nan	ne (La	st name first, if	individual)				****	-	
Business	s or Re	esidence Addres	s (Number	and	Street, City, State, Zip	Code)		- 	
Check B	ox(es	that Apply:	Promoter		Beneficial Owner		Executive Officer	Director	General and/or Managing Partner
Full Nan	ne (La	st name first, if	individual)			'4		 -	· · ·
Business	s or Re	esidence Addres	s (Number	and	Street, City, State, Zip	Code)			
Check B	ox(es	that Apply:	Promoter		Beneficial Owner		Executive Officer	Director	General and/or Managing Partner
Full Nan	ne (La	st name first, if	individual)				·····		
Business	or Re	esidence Addres	s (Number	and	Street, City, State, Zip	Code)			
			(Lise blank	chee	t or copy and use add	itional d	conies of this sheet as	necessary)	······································

					J									
					B.	INFORMA	TION AB	OUT OFFE	RING					
1.						ll, to non-ac		vestors in tl	his offering	?	Yes	No ⊠		
2.						epted from a		ıal		*****************	\$25	*000,000		
						rectors to ac								
3.						gle unit								
4.						vho has beer							r similar ociated perso:	
						nection with C and/or wit								II OI
	persons	to be liste				a broker or								
	Applica													
Full Na	me (Last	name first	t, if individ	ual)										
Busines	s or Res	idence Ado	dress (Num	ber and Stre	ect, City,	State, Zip C	ode)							
Name o	f Associ	ated Broke	er or Dealer	•										
				licited or Individual Sta		Solicit Purch	asers					☐ All	States	
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[L[V]] [X[T]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
	[171]	[90]		[,,,]		[01]	[7 1]		[#7]	["']	[""]	[** 1]		
Full Na	me (Last	name first	t, if individ	ual)										
Busines	s or Res	idence Add	dress (Num	ber and Stre	et, City,	State, Zip C	ode)							
Name o	f Associ	ated Broke	er or Dealer	•		. "								
						Solicit Purch	asers	_				_		
(0	Check "A	All States"	or check in	dividual Sta	ites)							☐ All	States	
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL] [MT]	[IN] [NE]	[IA] [NV]	[KS]	[K]Y]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[RI]	[SC]	[SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]	
Full Na	me (Last	name firs	t, if individ	ual)		·					_	<u> </u>		
Busines	s or Res	idence Ado	dress (Num	ber and Stre	ei, City,	State, Zip C	ode)							
Name o	f Associ	ated Broke	er or Dealer											
				licited or Int dividual Sta		Solicit Purch	asers	-				☐ All	States	
	[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]	
	[IL]	[IN]	[IA]	[KS]	[KŶ]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	
	[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[N.]] [T.X.]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	(OR) [WY]	[PA] [PR]	
-	r1	[~~]		()		[2,1			[1,, ,1	[]	r., +1	()	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

l.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is
	"none" or "zero". If the transaction is an exchange offering, check this box [] and indicate in the columns below the amounts of
	the securities offered for exchange and already exchanged.

Type of Security			Aggregate Offering Price	Amount Already Sold
Debt			\$0	\$0
Equity			\$4,000,000,000	\$21,300,000
	[X]Common	[] Preferred		
Convertible Securities (inclu	iding warrants)		\$0	\$0
Partnership Interests			\$0	\$0
Other (Specify)		\$0	\$ 0
	mendiy Column 3 it 1	iling under ULOF	\$4,000,000,000	\$21,300,000

Answer also in Appendix, Column 3, if filing under ULOE.

Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."

	Number Investors	Aggregate Dollar Amount of Purchases
Accredited Investors	 9	\$21,300,000
Non-accredited Investors	0	\$0
		\$

Answer also in Appendix, Column 4, if filing under ULOE.

If this filing is for an offering under Rule 504 or \$05, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.

Type of Offering		Type of Security	Dollar Amount Sold
Rule 505	,		\$
			\$
			\$
Total			\$

a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.

Transfer Agent's Fees		[]	\$0
Printing and Engraving Costs		[X]	\$*
Legal Fees		[X]	\$*
Accounting Fees		[X]	\$ *
Engineering Fees		[]	\$0
Sales Commissions (specify finders' fees separate	 y)	[]	\$0
Other Expenses (identify)		[X]	\$*
Total		[X]	\$35,000*

^{*}All offering and organizational expenses are estimated not to exceed \$35,000.

	b. Enter the difference between the aggregate offering price give expenses furnished in response to Part C - Question 4.a. This diffissuer."	fference is th		ustec	l gross proceeds to	the		\$3,999,965,000
5.	Indicate below the amount of the adjusted gross proceeds to the is purposes shown. If the amount for any purpose is not known, fur estimate. The total of the payments listed must equal the adjusted C - Question 4.b above.	rnish an esti	mate a	ınd c	heck the box to the	: left	of the	
					Payments to Officers, Directors, & Affiliates			Payments to Others
	Salaries and fees		[]	\$	ĺ]	<u>\$</u>
	Purchase of real estate		[]	\$	Į.]	\$
	Purchase, rental or leasing and installation of machinery and equi	ipment	[]		ĺ	}	\$
	Construction or leasing of plant buildings and facilities		[]	\$	[]	\$
	Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the ass securities of another issuer pursuant to a merger)	sets or	[]	\$	[]	\$
	Repayment of indebtedness	•••••	[]	\$	[]	\$
	Working capital		ĺ]	\$	[]	\$
	Other (specify): Investments in Ivory Flagship Master, Ltd	<u>d.</u>	ĺ)	\$	[х]	\$3,999,965,000
	Column Totals		[]	\$	[]	Хĵ	\$3,999,965,000
	Total Payments Listed (column totals added)	***************************************			[X] <u>\$</u>	3,999	9,965	,000
	D. FED	DERAL SIG	NATI	JRE				 .
ign	issuer has duly caused this notice to be signed by the undersigned ature constitutes an undertaking by the issuer to furnish to the U.S rmation furnished by the issuer to any non-accredited investor pur	S. Securities	and E	xcha	nge Commission, i	upon	writte	en request of its staff
							D	ate , , /
ssu	er (Print or Type) ry Offshore Flagship Fund, Ltd. (Class D & E Shares)	Signature	lgali	- 1 \	7 Willer			8/3/01/
ssu	ry Offshore Flagship Fund, Ltd. (Class D & E Shares)	Signature Title of Sign	/					8/3/01/

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

		E. STA	TE SIGNATURE					
1.	Is any party described in 17 CFR 230.262 p	Yes No 62 presently subject to any of the disqualification provisions of such rule?						
	See Ap	pendix, Column 5, fo	or state response. Not app	licable				
2.	The undersigned issuer hereby undertakes (17 CFR 239.500) at such times as required	ertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D required by state law. Not applicable						
3.	The undersigned issuer hereby undertakes offerees. Not applicable	lertakes to furnish to the state administrators, upon written request, information furnished by the issuer to						
4.	Offering Exemption (ULOE) of the state	ssuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited on (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this burden of establishing that these conditions have been satisfied. Not applicable						
	e issuer has read this notification and know dersigned duly authorized person.	vs the contents to b	e true and has duly caus	ed this notice to be s	signed on its behalf by the			
İss	uer (Print or Type)		Signature	. 1	Date			
Ivo	ory Offshore Flagship Fund, Ltd. (Class I	& EShares)	Chitosles.	7. Wulley	8/3/07			
Na	me (Print or Type)		Title (Print or Type)		, , ,			
Ch	ristopher T. Winkler		Director					

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

F٦	JORV	OFFSHORE FI	LAGSHIP FUND.	LTD.
13	V U J K I	OPPORTURE PL	AUSIIII I UND.	LID.

				FSHORE F	LAGSHIP F	UND, LTD.				
1	2	i	3					5 Not Applicable Disqualification under State ULOE (if yes, attach		
	Intend to		Type of security							
	non-acc		and aggregate offering price							
	Sta		offered in state	Type of in	Type of investor and amount purchased in State				explanation of waiver granted)	
	(Part B-		(Part C-Item 1)		(Part C-Item 2)			(Part E-Item 1)		
State	Yes	No	(Class D & E Shares) Participating Non-Voting Shares \$4,000,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
AK										
AL										
AR						<u> </u>				
AZ										
CA		Х	Х	1	\$250,000	0	0			
со										
CT								·-		
DC	1	Х	Х	1	\$4,500,000	0	0			
DE						-				
FL										
GA		Х	Х	1	\$250,000	0	0			
НІ										
IA									77	
ID				_		<u></u>				
IL										
IN										
KS										
KY		х	X	1	\$3,600,000	0	0			
LA	<u> </u>									
MA		Х	Х	1	\$750,000	0	0			
MD		Х	х	1	\$250,000	0	0			
ME		Х	Х	1	\$9,000,000	0	0			
MI	<u> </u>	X	х	1	\$1,700,000	0	0			
MN	<u> </u>					<u>.</u> .				
МО										
MS										
МТ		<u> </u>			7 of 8				C 1972 (1/9/	

7 of 8

APPENDIX

IVORY OFFSHORE FLAGSHIP FUND, LTD.

	_			FSHORE F	LAGSHIP F	UND, LID.			<u> </u>	
I 	2		3		4				5 Not Applicable Disqualification	
		Intend to sell to Type of security				}	under State ULOE			
	non-acc		and aggregate offering price	ļ	Type of investor and amount purchased in State				(if yes, attach explanation of waiver granted)	
	Sta		offered in state	Type of ir						
	(Part B-		(Part C-Item 1)	1,700 01 11	(Part C-Item 2)			(Part E-Item 1)		
State	Yes	No	(Class D & E Shares) Participating Non-Voting Shares \$4,000,000,000	Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No	
NC										
ND										
NE										
NH									,	
NJ										
NM										
NV										
NY		Х	х	1	\$1,000,000	0	0			
ОН										
ОК									-	
OR										
PA										
PR										
RI										
SC			<u></u>							
SD					-					
TN										
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UT										
VA										
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VT									-	
WA					<u> </u>					
WI	<u> </u>									
WV	ļ									
WY_	1	l		<u> </u>						